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NEWHAVEN URBAN DISTRICT COUNCIL

A N N U A L R E P O R T

of the

Medical Officer of Health

for the

YEAR ENDED - 31st December, 1966

NEWHAVEN URBAN DISTRICT COUNCIL
HEALTH AND HOUSING COMMITTEE
CONSTITUTION AT 31st DECEMBER, 1966

Chairman

Councillor G. W. Fox

Vice Chairman

Councillor H. D. Newnham

Councillors:-

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B. E. Jackson

V. Hedges, J.P.

R. Patterson

J. Angus

A. R. J. Tucker

R. F. Michaelis

D. Kennedy

R. H. Richardson

PUBLIC HEALTH DEPARTMENT

Medical Officer of Health

J. L. Cotton, M.B., Ch.B., M.R.C.S., L.R.C.P., D.P.H.

The Grange, Southover, Lewes.

Telephone No:- Lewes 4282

Public Health Inspector

W. P. Harrison, M.R.S.H.

Temporary Assistant Public Health Inspector

J. E. L. Smith (Appointed 1st September, 1965)

Office Staff

Mrs. L. V. J. Harris (Appointed 12th October, 1964)

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To the Chairman and Members of the Newhaven Public Health and Housing Committee.

Mr. Chairman and Gentlemen,

I have the honour to submit the Annual Report on the state of public health and on the sanitary circumstances of Newhaven for 1966.

The vital statistics of the area compare very favourably with those for England and Wales and do not call for more than a brief comment. No infant deaths were notified whereas seven infants deaths occurred during 1965. This wide variation has no particular significance other than to illustrate the danger of attaching undue importance to statistics derived from small populations.

40 cases of infectious disease were notified during the year and of these 38 were measles. Trials of the measles vaccine are continuing in various areas of the country. Many questions about its use still remain unanswered but vaccination against measles can give a very good degree of protection. It remains to be seen if measles vaccination will be added to the routine schedule of vaccination and immunisation recommended for children. I still believe that there is no justification for retaining measles on the list of notifiable diseases except on a local basis where the measles vaccine is on trial. Only one new case of tuberculosis was notified during the year.

After a period of several years during which no Council building was carried out, it is pleasing to be able to report that the building of Council houses has been resumed. Thirty-four houses were started towards the end of the year and there is every hope that further Housing Schemes will follow. The provision of additional Council accommodation will enable the clearance of unfit houses to be restarted. Only one unfit house was dealt with during the past year. The slum clearance programme has fallen behind since the Council house building ceased in 1962.

The area continues to develop industrially. During the year more industrial premises were completed and the number of persons employed in the town is rising steadily. It is estimated that more than 2,500 persons are now employed in local factories. Some of these industrial processes have given rise to nuisances on occasions. If proper planning control is exercised, it ought to be possible to adequately separate industrial and residential areas. If, however, industrial development is allowed adjacent to residential property, some industrial processes must be a nuisance to people living nearby. The old adage that prevention is better than cure is very true in these cases.

I should like to comment once again on the need for eternal vigilance against the ingestion diseases; that is those diseases caused by organisms entering the body through the mouth. Methods of control are chiefly prevention of bowel to mouth infection by sanitary disposal of excreta and provision of pure food and drink. Whilst our drinking water supplies can be considered safe, the same cannot be said of our food supplies. The handling of food all too often leads to contamination with the resulting outbreaks particularly of food poisoning and dysentery; typhoid is

P.T.O.

now normally an uncommon disease in the country. If food was handled hygienically, this contamination would not occur but standards of food hygiene are sometimes deplorably low. Hand washing is essential after use of the toilet for everyone if the risk of contamination is to be reduced. If a food handler neglects this precaution he can risk the health of many people. The general public could do much more to raise the standards of food hygiene by refusing to tolerate any insanitary methods of food handling. They should complain loudly and continuously whenever cooked food stuffs are touched by hand, whenever they are served with dirty or chipped crockery and dirty cutlery and whenever adequate toilet facilities do not exist. There is a tendency in this country to put up with existing conditions rather than to complain, but the more complaints there are about these unhygienic practices, the more the work of the public health department is helped. Your officials can only do a certain amount - it is up to the public to raise their standards. They will get the standard of service they demand.

In conclusion, I should like to express my appreciation to the Members of the Council for the help and support I have received from them during the year. My thanks are also due to Mr. Harrison the Chief Public Health Inspector and to Mr. Smith who was appointed in September, 1965 as a part-time inspector, for their valuable assistance and to other officials of the Council for their courtesy and co-operation.

I am Mr. Chairman and Gentlemen,
Your obedient servant,

J. L. COTTON,

Medical Officer of Health.

SECTION I

STATISTICS FOR THE AREA

(a) GENERAL STATISTICS

Area (acres)	1,772
Population (Registrar General's estimate for mid year 1966)	9,380
Population (1931 Census)	7,381
Population (1951 Census)	7,783
Population (1961 Census)	8,325
Net increase of population during the year	120
Number of occupied houses 1951	2,196
Number of occupied houses 1965	3,063
Rateable Value (January, 1967)	£457,318
Product of penny rate	£1,975

(b) VITAL STATISTICS

1. <u>Births and Birth Rates</u>	<u>NEWHAVEN</u> <u>U.D.</u>	<u>ENGLAND</u> <u>& WALES</u>
Live Births	158	
Live birth rate per 1,000 population (crude)	16.8	17.7
* Corrected birth rate	19.0	
Illegitimate live births per cent of total live births	9.5	
Still-births	1	
Still-birth rate per 1,000 live and still births	6.9	15.4
Total live and still-births	159	
Live births		
Legitimate	71	72
Illegitimate	9	6
	80	78
	158	

2. Deaths and Death Rates

Deaths	139	
Death rate per 1,000 population (crude)	14.8	
* Corrected death rate	12.0	11.7
Infant deaths (deaths under 1 year)	0	
Total infant deaths per 1,000 total live births)	0	19.0
Maternal mortality (including abortions)		
Number of deaths	0	223
Rate per 1,000 live and still births	0	0.26

* In order to compare death rates and birth rates in different parts of the country, the Registrar General supplies comparability factors for every district, so as to adjust for irregularities regarding age and sex in the local population. Applying a comparability factor of 1.13 to the crude birth rate of 16.8 the adjusted rate becomes 19.0 which is higher than the figure of 17.7 for England and Wales. Similarly a comparability factor of 0.81 applied to the crude death rate makes the adjusted rate of 12.0. This is higher than the rate for England and Wales at 11.7

POPULATION

The population of Newhaven for the last ten years is given below:-

<u>Year</u>	<u>Population</u>	<u>Births</u>	<u>Deaths</u>	<u>Birth Rate</u>	<u>Adjusted Birth Rate</u>	<u>Death Rate</u>	<u>Adjusted Death Rate</u>
1957	8,030	99	105	12.3		13.1	
1958	8,020	121	107	15.1	15.5	13.3	11.5
1959	8,010	103	98	12.9	13.2	12.2	10.0
1960	8,160	136	103	16.7	17.2	12.6	10.2
1961	8,360	117	109	14.0	14.4	13.4	10.7
1962	8,520	145	134	17.0	17.5	15.7	13.4
1963	8,780	143	137	16.3	18.4	15.6	12.3
1964	9,010	171	117	19.0	21.4	13.0	10.5
1965	9,260	165	124	17.8	20.1	13.4	10.7
1966	9,380	158	139	16.8	19.0	14.8	12.0

The increase in population during 1966 was 120 and it seems likely that the population will continue to rise at a steady rate over the foreseeable future.

MATERNAL MORTALITY

No case of maternal mortality occurred in Newhaven during 1966. Only one maternal death has occurred in the area during the last thirty years.

INFANTILE MORTALITY

No infant deaths occurred in 1966 in Newhaven.

BIRTH RATE

The corrected birth rate is higher than that for England and Wales.

DEATH RATE

The corrected death rate of 12.0 per 1,000 population was slightly higher than the national figure of 11.7.

Highest age at death was 96 years
Lowest age at death was 6 years
Average age at death was 73.5 years

MAIN CAUSES OF DEATH

		<u>% of deaths</u>
(1) Diseases of the heart and circulatory system	61	43.9
(Coronary Disease accounted for)	23	16.5
(2) Cancer (all sites)	21	15.1
(Cancer of the lung or bronchus accounted for)	8	5.7

NATIONAL ASSISTANCE ACT 1948

It was not necessary to take action under Section 47 of the above Act which gives the Council power to remove to suitable premises persons who are not able to devote to themselves and are not receiving from other persons adequate care and attention.

Cause of Death	Sex	Total	Under	4 Weeks										75 &
		All	4	& Under	1-	5-	15-	25-	35-	45-	55-	65-	over	
		Ages	Weeks	1 Year										
Syphilitic Disease	M	1	-	-	-	-	-	-	-	-	-	1	-	
	F	-	-	-	-	-	-	-	-	-	-	-	-	
Malignant Neoplasm Stomach	M	1	-	-	-	-	-	-	-	-	-	1	-	
	F	1	-	-	-	-	-	-	-	-	1	-	-	
Malignant Neoplasm Lung Bronchus	M	8	-	-	-	-	-	-	-	-	2	4	2	
	F	-	-	-	-	-	-	-	-	-	-	-	-	
Malignant Neoplasm Breast	M	-	-	-	-	-	-	-	-	-	-	-	-	
	F	1	-	-	-	-	-	-	-	1	-	-	-	
Malignant Neoplasm Uterus	F	1	-	-	-	-	-	-	-	-	-	-	1	
Other Malignant & Lymphatic Neoplasms	M	6	-	-	-	-	-	-	-	1	1	1	3	
	F	3	-	-	-	-	-	-	-	-	1	-	2	
Diabetes	M	2	-	-	-	-	-	-	-	-	-	2	-	
	F	-	-	-	-	-	-	-	-	-	-	-	-	
Vascular lesions of Nervous System	M	8	-	-	-	-	-	-	-	-	1	2	5	
	F	20	-	-	-	-	-	-	-	-	-	5	15	
Coronary Disease Angina	M	13	-	-	-	-	-	-	-	1	7	4	1	
	F	10	-	-	-	-	-	-	-	-	-	4	6	
Hypertension with Heart Disease	M	1	-	-	-	-	-	-	-	-	-	-	1	
	F	1	-	-	-	-	-	-	-	-	-	-	1	
Other Heart Disease	M	12	-	-	-	-	-	-	1	1	2	-	8	
	F	18	-	-	-	-	-	-	-	-	-	3	15	
Other Circulatory Disease	M	-	-	-	-	-	-	-	-	-	-	-	-	
	F	6	-	-	-	-	-	-	-	-	-	3	3	
Pneumonia	M	4	-	-	-	-	-	1	-	-	-	-	3	
	F	1	-	-	-	-	-	-	-	-	-	-	1	
Bronchitis	M	6	-	-	-	-	-	-	-	-	1	1	4	
	F	2	-	-	-	-	-	-	-	-	1	-	1	
Other Diseases of Respiratory System	M	1	-	-	-	-	-	-	-	-	-	-	1	
	F	-	-	-	-	-	-	-	-	-	-	-	-	
Congenital Malformations	M	-	-	-	-	-	-	-	-	-	-	-	-	
	F	1	-	-	-	1	-	-	-	-	-	-	-	
Other Defined and Ill-Defined Diseases	M	4	-	-	-	-	-	-	-	-	-	3	1	
	F	4	-	-	-	-	-	-	-	1	-	3	-	
Suicide	M	2	-	-	-	-	1	-	-	-	1	-	-	
	F	1	-	-	-	-	-	-	-	1	-	-	-	
TOTAL ALL CAUSES	M	69	-	-	-	-	1	1	1	3	15	19	29	
	F	70	-	-	-	1	-	-	-	3	3	18	45	

SECTION II

GENERAL PROVISION OF HEALTH SERVICES IN THE AREA

1. PUBLIC HEALTH FACILITIES OF THE LOCAL AUTHORITIES

During the period under review the Medical Officer of Health for Newhaven also acted as Medical Officer of Health for the Borough of Lewes, the Urban District of Seaford and the Rural District of Chailey.

One Public Health Inspector carried out duties in the Urban District of Newhaven, assisted by a temporary Assistant Public Health Inspector whose main duty was the inspection of premises in connection with the Offices, Shops and Railway Premises Act, 1963.

2. LABORATORY FACILITIES

These are provided by the Public Health Laboratory, at the Royal Sussex County Hospital, Brighton.

3. AMBULANCE FACILITIES

The provision of the ambulance service is the responsibility of the East Sussex County Council.

The area served by the ambulance includes the districts of Newhaven, Peacehaven, Telscombe, Piddinghoe, Tarring Neville and South Heighton. In the event of a further call or calls being received before the ambulance has returned from a previous journey, arrangements are in being for the call to be dealt with by other authorities in the area.

The East Sussex County Council provide facilities for the transport of tuberculosis patients.

4. HOSPITALS

Under the provisions of the National Health Service Act, 1946, the Ministry of Health is responsible for the provision of hospital accommodation which, in this area, was materially the same as in previous years.

5. NURSING IN THE HOME

As in previous years, the East Sussex County Council, as empowered by Section 25 of the National Health Service Act, 1946, has arranged for the service to be provided by the East Sussex County Nursing Association through the Newhaven and District Nursing Association.

6. CLINICS AND TREATMENT CENTRES

The following is a list of clinics and treatment centres available during 1966 for residents of the district:-

Description and Situation	Day and Time of Attendance	By whom provided
Dental Clinic, Hillcrest Road Centre, NEWHAVEN.	Monday to Friday inclusive of each week By appointment	East Sussex County Council
Speech Therapy, Hillcrest Road Centre, NEWHAVEN.	Every Monday by appointment	East Sussex County Council
Cytology Clinic, Hillcrest Road Centre, NEWHAVEN.	Mornings - 3rd Tuesday in every month Evenings - 2nd & 4th Tuesday in every month	East Sussex County Council
Toddlers Clinic, Hillcrest Road Centre, NEWHAVEN.	Mornings - 3rd & 5th Wednesday in every month	East Sussex County Council
Ante-natal Clinic, Hillcrest Road Centre, NEWHAVEN.	Afternoons- 1st 2nd & 3rd Monday in every month (General Practitioners Clinics) - 4th Monday in every month (Midwives Clinic) - 4th Tuesday in every month (General Practitioners Clinic)	East Sussex County Council
Mothercraft & Relaxation Clinic, Hillcrest Road Centre, NEWHAVEN.	Afternoons - 1st 2nd 3rd & 4th Tuesday in every month	East Sussex County Council
Infant Welfare Centre, Hillcrest Road Centre, NEWHAVEN.	Afternoons - 1st 2nd 3rd & 4th Wednesday in every month	East Sussex County Council
Immunisation & Vaccination Clinics, Hillcrest Road Centre, NEWHAVEN.	Afternoons - 1st Thursday in every month	East Sussex County Council
Welfare Foods, Hillcrest Road Centre, NEWHAVEN.	Afternoons - Monday Wednesday & Friday of each week.	East Sussex County Council
Infant Welfare Centre, Denton Church Hall, DENTON.	Afternoons - 3rd Tuesday in every month	East Sussex County Council

7. PROVISION FOR DEALING WITH THE NEEDS OF THE MENTALLY DISORDERED

Under the provisions of the Mental Health Act, 1959 the East Sussex County Council makes provision for dealing with the needs of the mentally disordered. The provision of care in psychiatric hospitals is the responsibility of the Regional Hospital Board.

SECTION III

SANITARY CIRCUMSTANCES OF THE AREA

1. WATER SUPPLY

The district has two sources of water supply. All supplies are from the mains, direct to houses.

(a) From the Mid-Sussex Water Company's well sunk into the chalk at Poverty Bottom.

Nine samples of the treated water were submitted for analysis by the Water Company during 1966. All proved to be of good quality. The supply is ample and sufficient for all purposes.

(b) From the British Railways well at Denton. In addition to providing the main supply to the Harbour this also is supplied to four houses and the Railway and Harbour Hotels.

Fifty-three samples before treatment and fifty-two samples of the treated water from this source were submitted for analysis by the Medical Department of British Railways. The supply is satisfactory in quality and ample in quantity.

2. HOUSING

No rehousing from Slum Clearance Areas took place during the year. No Council houses were completed or in course of construction in 1966.

Sixty-five private houses were built during the year.

The Council at 31st December, 1966, owned 640 houses and flats, twenty-five houses having been purchased by agreement during the year.

3. SEWERAGE

All premises in the district are connected to the sewers with the following exceptions:-

Premises with Cesspools

West Pier	3
Court Farm Road	4
Harbour Heights	39
Denton and Mount Pleasant	7
Lewes Road	10
New Road	2
Valley Road	8

4. SCAVENGING

Household refuse was collected from all premises in the area within fifty yards of a reasonably accessible road. Trade refuse was collected where necessary twice a week. All refuse was disposed of by controlled tipping on the Council tip on Denton Island. Arrangements have continued whereby private persons are, on the production of an authorization, allowed to place waste material or trade refuse on the tip.

Both the bulk and tonnage of household and trade refuse continue to increase and the last available space on the existing refuse tip at Denton Island is being used up. Negotiations for the use of land at Lewes Road as a controlled tip are now complete and accommodation works are in hand. The tip will come into use in the early part of 1967. This will make provision for disposal for many years and will bring a low-lying wet area up to the level of Lewes Road.

BULKY REFUSE COLLECTION

The service instituted in 1964 whereby householders can, by calling the Surveyor's Department, have bulky articles removed and destroyed free of charge, continues to be very popular. This is now at fortnightly intervals on Fridays. It is estimated that more than 110 tons of waste material was collected in 1966, which is having a noticeable effect on the improper dumping of litter in the area.

5. HOUSING AND GENERAL INSPECTIONS

The following is a list of the number and nature of inspections carried out during the year by your Public Health Inspector.

Housing:

Inspection under the Public Health Acts	..	59
Reinspection under the Public Health Acts	..	45
Inspections under the Housing Acts..	..	28
Reinspections under the Housing Acts	..	43
Inspection of Verminous Houses	..	8
Reinspection of Verminous Houses	..	14

Infectious Diseases:

No action was necessary.

General Sanitation:

Water Supply	..	16
Drainage	..	56
Stables and Piggeries	..	17
Fried Fish Shops	..	35
Factories and Workshops	..	65
Bakehouses..	..	9
Public Conveniences..	..	39
Refuse Accumulations	..	23
Rats and Mice	..	82
Caravan Sites	..	84
Ditches and Ponds	..	37
Miscellaneous	..	74

Food and Food Shops:

Butchers	..	42
Fishmongers	..	30
Grocers	..	73
Ice Cream Premises	..	77
Dairies	..	10
Restaurants and Cafes	..	52
Canteens	..	26
Licensed Premises	..	11
Food Hygiene Regulations..	..	46

6. OFFICES, SHOPS AND RAILWAY PREMISES ACT, 1963

The Council appointed a retired Public Health Inspector on a part-time basis to assist with the inspections under the Act. He began work on 1st September, 1965.

The following inspections and registrations were made during the year under review:-

Class of Premises	Number registered during the year	Total registered premises at end of year	Number of registered premises receiving a general inspection during the year
Offices	7	21	13
Retail Shops	18	64	34
Wholesale Shops Warehouses	-	7	5
Catering Estabs. open to the public Canteens	9	16	15
Fuel Storage Depots	-	-	-
TOTALS	34	108	67

On the completion of the Survey of the District it was found there were 199 premises, of this 119 were found to come under the provisions of the Act. The total premises are made up as follows:-

Persons employed under a total of 21 hours per week	14
Family businesses only	59
Empty premises	7
Employment of persons over 21 hours per week	119
	<u>199</u>

At the end of the year works were outstanding at 10 premises only.

In addition 408 visits, other than those required for general inspection, were made during the year.

A total of 603 persons - 224 male and 379 female - were employed in the registered premises subjected to inspection.

During 1966 investigations were made into the cause of 2 reported accidents of slight or moderate degree, involving injury to persons, advice was given or alterations to premises carried out to attempt to prevent a repetition.

7. ERADICATION OF BED BUGS

Number of Houses infested:-

Council Houses ... Nil
Other Houses ... Nil

8. PREMISES CONTROLLED BY BYELAWS AND REGULATIONS:

(a) Clean Food Byelaws are in force, made under Section 15 of the Food and Drugs Act 1955.

(b) Slaughter of Animals. There are no slaughterhouses in the district. Fresh meat is obtained principally from slaughterhouses and markets in Brighton and Chailey. There is one licensed slaughterman in the district.

(c) Milk Supply. Two dairies from which milk is supplied to the district retail received special attention.

(d) Other Foods. All premises where food is prepared for sale were inspected regularly.

(e) Food Hygiene (General) Regulations 1960.

Category	<u>Regulation 16</u>		<u>Regulation 19</u>	
	No.	Complying	No.	Complying
Butchers	6	6	6	6
Fishmongers and Fried Fish Shops	1	1	1	1
Grocers Supermarket	2	2	2	2
Grocery & General Stores	24	24	24	24
Grocers Warehouse	1	1	1	1
Greengrocers	7	7	7	7
Licensed Premises	26	26	26	26
Dairies	2	2	2	2
Ice Cream Premises	32	32	32	32
Canteens	10	10	10	10
Cafes & Restaurants	17	17	17	17
	128	128	128	128

In addition to 46 visits for the specific purpose of the regulations, 346 general inspections of food premises were made.

9. UN SOUND FOOD

The following foodstuffs were found to be unsound, condemned and suitably disposed of:-

	Tons.	Cwt.	Qrt.	lbs.	Ozs.
Meat (Home killed)	0	0	2	0	0
Meat (Tinned various)	0	1	2	11	2
Fish (Fresh)	0	6	0	6	8
Fish (Tinned)	0	0	0	1	14
Fruit (Fresh)	2	2	0	8	0
Fruit (Tinned)	0	0	3	13	15
Vegetables (Fresh)	0	0	3	26	4
Vegetables (Tinned)	0	0	1	16	0
Butter and other Fats	0	2	1	23	13
Miscellaneous	0	0	1	19	14
TOTAL	2	15	1	15	6

10. FACTORIES ACT 1961

In the Urban District of Newhaven there are two factories in which Sections 1, 2, 3, 4, and 6 of the above Act are enforced, and 60 in which Section 7 only is enforced.

PART I OF THE ACT

1. Inspections for purposes of provision as to health (including inspections made by the Public Health Inspector).

PREMISES	NUMBER ON REGISTER	INSPECTIONS	WRITTEN NOTICES	OCCUPIERS PROSECUTED
(1) Factories in which Sections 1, 2, 3, 4 & 6 are to be enforced by the Local Authority	2	4	Nil	Nil
(2) Factories not included in (1) in which Section 7 is enforced by the Local Authority	60	58	Nil	Nil
(3) Other premises in which Section 7 is enforced by L. A. (excluding outworkers premises).	4	3	Nil	Nil
TOTAL	66	65	Nil	Nil

2. Cases in which defects were found

PARTICULARS	FOUND	REMEDIED	REFERRED TO H. M. INSPECTOR	REFERRED BY H. M. INSPECTOR	NO.OF CASES IN WHICH PROSECUTION WAS INSTI- TUTED
Want of cleanliness (S.I.)	-	-	-	-	NIL
Overcrowding (S.2)	-	-	-	-	NIL
Unreasonable Temperature (S.3)	-	-	-	-	NIL
Inadequate vent- ilation (S.4)	-	-	-	-	NIL
Ineffective drainage of floors (S.6)	-	-	-	-	NIL
Sanitary Conven- iences (S.7)	-	-	-	-	NIL
Other offences against the Act (not including offences relating to Outwork)	-	-	-	-	NIL

PART VIII OF THE ACT

Outworkers

	SECTION 133		SECTION 134			
Nature of work	No. of out- workers in August list required by Section 133 (1) (c) (2)	No. of Cases of default in sending lists to the Council (3)	No. of prosecu- tions for failure to supply lists (4)	No. of instances of work in unwhole- some premises (5)	Notices served (6)	Pro- sec- uti- ons (7)
Curtains and furni- ture hang- ings.	1	-	-	-	-	-

SECTION IV

PREVALENCE OF, AND CONTROL OVER, INFECTIOUS AND OTHER DISEASES

INFECTIOUS DISEASES

Forty cases of infectious disease were notified in Newhaven during 1966. The details were as follows:-

DISEASE	NUMBER OF CASES	ADMITTED TO HOSPITAL	DEATHS
Measles	38	-	-
Scarlet Fever	1	-	-
Erysipelas	1	-	-

The following figures relating to Vaccination and Immunisation were supplied by the East Sussex County Council:-

DIPHTHERIA IMMUNISATION

	CHILDREN BORN IN YEARS:-						
	1966	1965	1964	1963	1959 1962	others under 16	TOTAL
A. NUMBER OF CHILDREN WHO COMPLETED A FULL COURSE OF PRIMARY IMMUNISATION IN THE AUTHORITY'S AREA DURING 1966.	64	70	3	3	2	-	142
B. NUMBER OF CHILDREN WHO RECEIVED A SECONDARY (REINFORCING) INJECTION DURING 1966.	-	46	74	21	106	128	375

Since immunisation was first introduced there has been a dramatic fall in the number of cases of diphtheria and also in the number of deaths from diphtheria. In 1966 there were three deaths from diphtheria and twenty-four cases compared with no deaths and thirty-five cases in 1965. To prevent this disease from spreading once again it is vital to maintain a high state of immunity in the community. I cannot urge parents too strongly to ensure that their children are protected against this disease since almost all the cases and deaths occur amongst non-immunised children. It has become all too common to regard diphtheria as a disease which no longer occurs and that there is no need to have children immunised. This is a very dangerous practice and every child should be immunised during infancy and again at the start of school life.

WHOOPING COUGH IMMUNISATION

	YEAR OF BIRTH						
	1966	1965	1964	1963	1959 1962	others under 16	TOTAL
NUMBER OF CHILDREN WHO HAVE COMPLETED A PRIMARY COURSE (normally three injections) OF PERTUSSIS VACCINE (Singly or in combination) IN THE AUTHORITY'S AREA DURING THE YEAR 1966	64	70	3	3	2	-	142

VACCINATION AGAINST SMALLPOX

The following persons under 16 years of age were vaccinated or revaccinated against smallpox in 1966.

AGE AT DATE OF VACCINATION	0 - 3 months	3 - 6 months	6 - 9 months	9 - 12 months	1 year	2 - 4 years	5 - 15 years	TOTAL
NUMBER VACCINATED	-	-	-	2	99	79	14	194
NUMBER REVACCINATED	-	-	-	-	-	-	-	-

During and since the recent outbreaks of smallpox a lot of confusion has been caused to the general population by the arguments for and against smallpox vaccination. The Ministry of Health have now issued a Memorandum on Vaccination against smallpox. The salient features are as follows:-

A. Routine Primary Vaccination in Early Childhood

(1) Optimum Age - Routine primary vaccination is not now recommended in the first few weeks of life but should be done before the age of two years, preferably during the second year.

(2) Contra-indications -

- (a) exposure to infectious disease
- (b) septic skin conditions
- (c) infantile exzema or any other allergic condition - these are absolute contra-indications to routine primary vaccination
- (d) hypogammaglobulinaemia
- (e) cortico-steroid treatment
- (f) failure to thrive

B. Routine Primary Vaccination at Later Ages

- (1) Although at any age the risk of serious complications following vaccination is much smaller than the risk of death run by those exposed to smallpox while unvaccinated, primary vaccination is not advised as a routine after early childhood. But, if not performed in early childhood, primary vaccination at a later age may eventually become necessary e.g. when serving with the armed forces, as a condition of employment and before undertaking foreign travel.
- (2) Contra-indications. Consideration must be give to:-
 - (a) septic skin conditions
 - (b) a history of, or the presence of, exzema
 - (c) hypogammaglobulinaemia
 - (d) cortico-steroid treatment. It is not considered wise to vaccinate routinely patients who are receiving systemic cortico-steroid treatment.
 - (e) early pregnancy. On general principles it is desirable to avoid the use of live vaccine during the first trimester of pregnancy.

C. Vaccination in the presence of Smallpox

The object is, by primary vaccination or revaccination as soon after exposure or, at most, within three days, to enable the individual to gain immunity to smallpox within the normal incubation period of that disease. In the presence of suspected smallpox there are no absolute contra-indications to the immediate vaccination or revaccination of all close contacts.

SECTION V

TUBERCULOSIS

In 1966 one new case of pulmonary tuberculosis was notified amongst Newhaven residents. No new case of non-pulmonary tuberculosis was notified, nor was any case of pulmonary tuberculosis notified amongst people coming to live in the area. One pulmonary case previously removed was restored to the register during the year on re-entry into the district. No deaths due to tuberculosis occurred in the district during 1966.

NEW CASES AND MORTALITY DURING 1966

AGE GROUPS	NEW CASES				DEATHS			
	Pulmonary		Non-Pulmonary		Pulmonary		Non-Pulmonary	
	M	F	M	F	M	F	M	F
Under 1 year	-	-	-	-	-	-	-	-
1 - 4	-	-	-	-	-	-	-	-
5 - 14	-	-	-	-	-	-	-	-
15 - 24	-	1R	-	-	-	-	-	-
25 - 34	1t.o.	-	-	-	-	-	-	-
35 - 44	-	-	-	-	-	-	-	-
45 - 54	-	-	-	-	-	-	-	-
55 - 64	-	1 New	-	-	-	-	-	-
65 +	-	-	--	-	-	-	-	-
TOTALS	1	2	-	-	-	-	-	-

R = Restored to register

t.o. = move out of district

NUMBER OF CASES ON REGISTER AT
31st DECEMBER 1966

MALES		FEMALES		TOTAL
Pulmonary	Non-Pulmonary	Pulmonary	Non-Pulmonary	
52	3	44	6	105
Whereas at 31st December, 1965, the number of cases on the register was:-				
56	3	42	6	107

